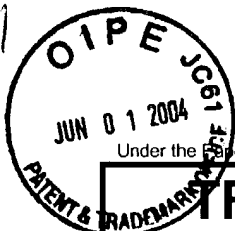


61



PTO/SB/21 (08-00)

Approved for use through 10/31/02. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number 09/717,187

Filing Date November 20, 2000

First Named Inventor Vikram Joshi

Group Art Unit 2124

Examiner Name Tuan A. Vu

Total Number of Pages in This Submission

22

Attorney Docket Number

50277-0378

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## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition To Convert To a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Return Postcard.
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Hickman Palermo Truong & Becker LLP
	Edward A. Becker, Reg. No. 37,777
Signature	
Date	May 27, 2004

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to: Mail Stop Appeal Brief-Patents, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:

Type or printed name	Angelica Jaquez
Signature	
Date	May 27, 2004

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## FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision,  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 AND 1.28

TOTAL AMOUNT OF PAYMENT **\$330.00**

### Complete if Known

Application Number 09/717,187  
Filing Date November 20, 2000  
First Named Inventor Vikram Joshi  
Examiner Name Tuan A. Vu  
Group/Art Unit 2124  
Attorney Docket No. 50277-0378

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### METHOD OF PAYMENT (check one)

1. ☒ Throughout the pendency of this application, please charge any additional fees, including any required extension of time fees, and credit all overpayments to deposit account 50-1302. A duplicate of this sheet is enclosed.

Deposit Account Number

50-1302

Deposit Account Name

Hickman Palermo Truong & Becker, LLP

2. ☒ Payment Enclosed:

☒ Check ☐ Money Order ☐ Other

3. ☐ Applicant(s) is entitled to small entity status.  
See 37 CFR 1.27.

### FEE CALCULATION (continued)

#### 3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2010	2255	1005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	\$330.00
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1330	2453	665	Petition to revive - unintentional	
1501	1330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Petitions related to provisional applications	
1806	180	1806	180	Submission of information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____					
Other fee (specify) _____					

#### 1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$ 0.00)

#### 2. EXTRA CLAIM FEES

		Highest Paid Claims		Extra Claims		Fee from Below		Fee Paid
Total Claims		-20=		X		18.00		= 0.00
Independent Claims		-3**=		X		86.00		= 0.00
Multiple Dependent								=
**or number previously paid, if greater; For Reissues, see below								
Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description				
1202	18	2202	9	Claims in excess of 20				
1201	86	2201	43	Independent claims in excess of 3				
1203	290	2203	145	Multiple dependent claim, if not paid				
1204	86	2204	43	**Reissue independent claims over original patent				
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent				
SUBTOTAL (2)						(\$ 0.00		

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

\$ 330.00

#### SUBMITTED BY

Name (Print/Type) Edward B. [Signature] Registration No. (Attorney/Agent) 37,777 Telephone (408) 414-1204  
Signature [Signature] Date May 27, 2004

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